Mediation Analysis using Semi-parametric Shape-Restricted Regression with Applications

Qing Yin¹, Jong-Hyeon Jeong¹, Xu Qin², Shyamal D Peddada^{*3}, and Jennifer J Adibi^{*4}

¹Department of Biostatistics, University of Pittsburgh

²Department of Health and Human Development, University of Pittsburgh

³Biostatistics and Bioinformatics Branch, NICHD

⁴Department of Epidemiology, University of Pittsburgh

Abstract

Often linear regression is used to perform mediation analysis. However, in many instances, the underlying relationships may not be linear, as in the case of placentalfetal hormones and fetal development. Although, the exact functional form of the relationship may be unknown, one may hypothesize the general shape of the relationship. For these reasons, we develop a novel shape-restricted inference-based methodology for conducting mediation analysis. This work is motivated by an application in fetal endocrinology where researchers are interested in understanding the effects of pesticide application on birth weight, with human chorionic gonadotropin (hCG) as the mediator. We assume a practically plausible set of nonlinear effects of hCG on the birth weight and a linear relationship between pesticide exposure and hCG, with both exposure-outcome and exposure-mediator models being linear in the confounding factors. Using the proposed methodology on a population-level prenatal screening program data, with hCG as the mediator, we discovered that, while the natural direct effects suggest a positive association between pesticide application and birth weight, the natural indirect effects were negative.

Key Words: Birth-weight; Constrained inference; Human chorionic gonadotropin (hCG); Mediation analysis; Placental-fetal hormones; Pesticides exposure; Regression spline; Shape-restricted inference.

1 Introduction

Population level life course data, originating during the fetal period, were originally used to develop the developmental origins of health and disease hypothesis (Barker, 2003). For example, infants whose mothers were exposed to famine in Europe in the last two trimesters during World War II tended to have lower birth weight and this was consequential for their subsequent risk of schizophrenia and adult cardiovascular disease (Hoek et al., 1998, van Abeelen et al., 2011). Later in his career, David Barker actively pursued measures of the placenta as a mediator to support his theory (Barker and Thornburg, 2013). However, these associations are challenging to interpret causally due to the many potential explanations and the lack of a causal mediator that can conceptually and quantitatively link the exposure and the outcome. Recently, Adibi et al. (2021a) established a methodology accounting for the role of placenta in a causal framework to address this gap.

Even though the analysis of a direct exposure-outcome effect is usually intuitive and easy to interpret, inclusion of a putative mediator can further strengthen causal inference and offer key insights to the reporting of an association. In some physiologic examples, such as pregnancy, it is implausible to not consider the role of the mediator. The placenta, a pregnancy-specific organ, is a physical and biologic interface between the mother and the fetus, and plays an important role in fetal growth (Benirschke and Kaufmann, 2000). For example, the placenta provides the fetus with nutrients. It can serve as a barrier and protect the fetus from some environmental toxins (Benirschke and Kaufmann, 2000).

The placenta supports development of the fetus by way of producing growth factors

and hormones. We hypothesize that environmental factors can change the quantities, proportions or timing of the placental hormones. In turn, these changes can alter development of organ systems. In the case of sex steroid hormones, the effects of the hormones are mediated by nuclear receptors and generally follow a U-shaped pattern (Li et al., 2007). In the case of gonadotropins, the effects are mediated by membrane receptors and can cause distinct effects at low doses that differ from those at high doses, as has been studied with gonadotropin releasing hormone. See for example, Vandenberg et al. (2013) and references therein.

The aim of this paper is to address two problems in developmental origins of health and disease (DOHaD) epidemiology: (1) the need for a causal mediation framework, and (2) the need for a method that accommodates nonlinearity in the mediator-outcome relationship. Regression-based mediation analysis has been developed to address this problem in epidemiology (VanderWeele, 2015, Baron and Kenny, 1986). However, this strategy assumes a linear relationship between the mediator and the outcome. In such cases as described above, linear models may potentially result in model misspecification, biased estimation, and hence incorrect conclusions.

The application of the generalized additive model (GAM) was proposed by Imai et al. (2010) to address the nonlinearity, where the direct and indirect effects are estimated using simulations. Although the GAM provides flexibility in modeling nonlinear relationships, the main effect is usually fitted using a smoothing curve, which is hard to be parametrized, and in many instances, the patterns of mean response may not be arbitrary. A simulation-based method was used for mediation analysis (Tingley et al., 2014), but the procedure is computationally intensive and does not allow for conditioning on confounding variables (thus, the controlled direct effect (CDE) may not be calculated). May and Bigelow (May and Bigelow, 2005) outlined methodological challenges and caveats when statistically modeling nonlinear associations using standard approaches such as splines. Hence, we aim to develop a flexible semi-parametric shaperestricted inference-based methodology to overcome some of the modelling challenges. Unless one is interested in modelling dynamic systems such as circadian clock or cell-

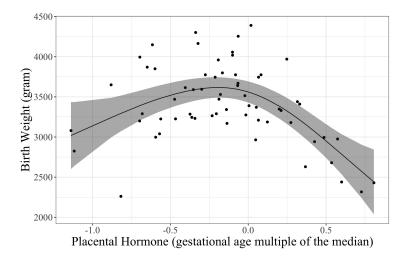


Figure 1: The relationship between a placental hormone (expressed as a gestational age multiple of median) and infant birth weight.

cycle, in many applications, it may be sufficient to model the relationships assuming monotonic, convex or concave shapes. An example of such nonlinear relationship is shown in Figure 1, where the relationship between the placental hormone and infant birth weight is concave. Hence in this paper we limit our focus on these classes of models. Our approach makes a compromise between the standard linear or polynomial regressions, which are rigid in shapes, and GAMs, which are too flexible by allowing arbitrary shapes and computationally intensive.

The paper is organized as follows. Using semi-parametric shape-restricted regression splines (Meyer, 2008, 2018, Yin et al., 2021), we develop outcome and mediator models in Section 2. The estimated parameters from these models are then used to estimate the direct and indirect effects of various factors and their confidence intervals. The performance of these estimators are evaluated using simulation studies in Section 3. In Section 4, the proposed methodology is applied to a population-level prenatal screening program data set to describe the role of placental hormones as mediators in the relationship between pesticide application and the birth weight of infants. Concluding remarks are provided in Section 5. All mathematical details are provided in the supplementary text.

2 Methodology

2.1 Background and Notations

Throughout this paper, the exposure variable for an individual will be denoted by A, M denotes the mediator, C denotes the confounder, and Y denotes the outcome variable. For a given individual with exposure A = a, the outcome is denoted by Y_a and the mediator is denoted by M_a , and Y_{am} denotes the outcome of an individual whose exposure A = a and mediator M = m. The controlled direct effect (CDE), the natural direct effect (NDE) and the natural indirect effect (NIE) are denoted by $Y_{am} - Y_{a^*m}, Y_{aM_{a^*}} - Y_{a^*M_{a^*}}$ and $Y_{aM_a} - Y_{aM_{a^*}}$, respectively. For the identifiability of the CDE, we assume that there is no unmeasured exposure-outcome confounding, i.e., $Y_{am} \perp (independent)A|C$, and there is no unmeasured mediator-outcome confounding, i.e., $Y_{am} \perp M|A, C$. For the identifiability of the NDE and NIE, besides the two assumptions above, we additionally assume that there is no mediator-outcome confounding affected by exposure, i.e., $Y_{am} \perp M|a^*|C$.

For a real number x, and a sequence of knots $t = \{t_1, t_2, \ldots, t_{n+k}\}, M_i(x|k, t)$ denotes the k^{th} order M-spline basis function, which is a piece-wise polynomial of degree k-1 (Curry and Schoenberg, 1966). The corresponding I-spline (Ramsay, 1988) and C-spline (Meyer, 2018) basis functions are given by $I_i(x|k, t) = \int_L^x M_i(u|k, t) du$ and $C_i(x|k, t) = \int_L^x I_i(u|k, t) du$, respectively.

The methodology developed in this paper relies on the general framework introduced in Meyer (2018) and Yin et al. (2021), which uses quadratic I-splines and cubic C-splines (see supplementary text for details). The quadratic I-splines are of interest in shape-restricted regression because a linear combination of quadratic I-spline basis functions is non-decreasing if and only if the coefficients are non-negative. The regression function using I-splines is estimated by a linear combination of the basis functions, the constant function and other covariates (Meyer, 2018). The cubic C-splines are of interest in shape-restricted regression because a linear combination of cubic C-spline basis functions is convex if and only if the coefficients are non-negative. The regression function using C-splines is estimated by a linear combination of the basis functions, the constant function, the identity function and other covariates (Meyer, 2018).

2.2 Model

Suppose that an interaction between exposure and mediator exists, and the relationships between mediator and outcome in both exposure and non-exposure groups are potentially nonlinear. Then the exposure-outcome relationship is modeled by

$$Y = \beta_0 + \beta_1 A + f_1(M)A + f_2(M)(1 - A) + \beta_4 C + \epsilon_1,$$
(1)

where $f_1(M)$ is the function of the mediator for the exposure group, $f_2(M)$ is the function of the mediator for the non-exposure group, and $\epsilon_1 \sim N(0, \sigma_1^2)$, and the exposure-mediator model will be

$$M = \gamma_0 + \gamma_1 A + \gamma_2 C + \epsilon_2, \tag{2}$$

where $\epsilon_2 \sim N(0, \sigma_2^2)$.

In the case of quadratic I-splines, $f_1(M) = \sum_{i=1}^k \beta_{2i} I_i(M|2,t)$ and $f_2(M) = \sum_{i=1}^k \beta_{3i} I_i(M|2,t)$, and in case of cubic C-splines, $f_1(M) = \beta_{20}M + \sum_{i=1}^k \beta_{2i} C_i(M|2,t)$ and $f_2(M) = \beta_{30}M + \sum_{i=1}^k \beta_{3i} C_i(M|2,t)$, reflecting the structures of the I- and C-spline basis functions in the supplementary text. Define $IS = [I_1(M|2,t), ..., I_k(M|2,t)]$ and $CS = [M, C_1(M|2,t), ..., C_k(M|2,t)]$. Denote the symbol "•" for the face-splitting product (for $A = \begin{bmatrix} a_1 \\ a_2 \end{bmatrix}$ and $B = \begin{bmatrix} b_{11} & b_{12} \\ b_{21} & b_{22} \end{bmatrix}$, the face-splitting product operates as $A \bullet B = \begin{bmatrix} a_{1}b_{11} & a_{1}b_{12} \\ a_{2}b_{21} & a_{2}b_{21} \end{bmatrix}$), and let $\beta_2 = [\beta_{21}, ..., \beta_{2k}]$ if the corresponding matrix is $IS \bullet A$, or $\beta_2 = [\beta_{20}, \beta_{21}, ..., \beta_{2k}]$ if the corresponding matrix is $IS \bullet (1 - A)$, or $\beta_3 = [\beta_{30}, \beta_{31}, ..., \beta_{3k}]$ if the corresponding matrix is $CS \bullet (1 - A)$.

If $f_1(M)$ and $f_2(M)$ are both monotonic, then they are fitted using the I-splines,

and model (1) is given by

$$Y = [1, A, IS \bullet A, IS \bullet (1 - A), C] [\beta_0, \beta_1, \beta_2, \beta_3, \beta_4]^T + \epsilon_1.$$
(3)

If $f_1(M)$ and $f_2(M)$ are both convex (or concave), then they are fitted using the C-splines, and the model (1) is given by

$$Y = [1, A, CS \bullet A, CS \bullet (1 - A), C] [\beta_0, \beta_1, \beta_2, \beta_3, \beta_4]^T + \epsilon_1.$$
(4)

If $f_1(M)$ is monotonic but $f_2(M)$ is convex (or concave), then $f_1(M)$ is fitted using I-splines and $f_2(M)$ is fitted using C-splines, and the model (1) is given by

$$Y = [1, A, IS \bullet A, CS \bullet (1 - A), C] [\beta_0, \beta_1, \beta_2, \beta_3, \beta_4]^T + \epsilon_1.$$
(5)

If $f_1(M)$ is convex (or concave) and $f_2(M)$ is monotonic, then $f_1(M)$ is fitted using C-splines and $f_2(M)$ is fitted using I-splines, and the model (1) is given by

$$Y = [1, A, CS \bullet A, IS \bullet (1 - A), C] [\beta_0, \beta_1, \beta_2, \beta_3, \beta_4]^T + \epsilon_1.$$
(6)

2.3 Statistical Inference

Regression parameters of the model (1) are estimated along the lines of Meyer (2018), but the method is modified to account for factor-by-curve interaction.

Define $CS = [CS_1, CS_2]$, where $CS_1 = M$ and $CS_2 = [C_1(M|2, t), ..., C_k(M|2, t)]$. For model (3), $W_0 = [1], W = [A, C], Z_1 = [IS \bullet A], Z_0 = [IS \bullet (1-A)]$ and $Z = [Z_1, Z_0]$; for model (4), $W_0 = [1, CS_1 \bullet A, CS_1 \bullet (1-A)], W = [A, C], Z_1 = [CS_2 \bullet A], Z_0 = [CS_2 \bullet (1-A)]$ and $Z = [Z_1, Z_0]$; for model (5), $W_0 = [1, CS_1 \bullet (1-A)], W = [A, C], Z_1 = [IS \bullet A], Z_0 = [CS_2 \bullet (1-A)]$ and $Z = [Z_1, Z_0]$; for model (6), $W_0 = [1, CS_1 \bullet A], W = [A, C], Z_1 = [A, C], Z_1 = [CS_2 \bullet A], Z_0 = [IS \bullet (1-A)]$ and $Z = [Z_1, Z_0]$; for model (6), $W_0 = [1, CS_1 \bullet A], W = [A, C], Z_1 = [CS_2 \bullet A], Z_0 = [IS \bullet (1-A)]$ and $Z = [Z_1, Z_0]$.

Let $V = [W_0, W]$, $P_V = V(V^T V)^{-1} V^T$, the orthogonal projection operator onto the column space of V^T , and $\Delta = (I - P_V)Z$. Using the hinge algorithm for cone projection (Meyer, 2013), a subset of columns of Δ are determined. We then keep the corresponding columns of Z and estimate the parameters of the model (1) using the ordinary least squares. The parameters corresponding to the eliminated columns of Z are estimated as 0. During the process of the hinge algorithm, if the signs of coefficients for the exposure or non-exposure group splines are assumed to be non-positive, i.e., the curve is assumed to be decreasing or concave, then we will use -IS or $-CS_2$ instead of IS or CS_2 . We estimate parameters of the model (2) using ordinary least squares.

Under the assumptions described in Section 2.1, we parametrize the expected controlled direct effect, natural direct effect and natural indirect effect as follows in Proposition 1. The detailed derivation is provided in the supplementary text.

Proposition 1 Suppose (1) for an individual with actual exposure A = a, the actual outcome Y is Y_a (consistency), (2) $Y_{am} \perp A|C$, (3) $Y_{am} \perp M|A, C$, (4) $M_a \perp A|C$ and (5) $Y_{am} \perp M_{a^*}|C$, and suppose (1) and (2) are correctly specified, then the expected controlled direct effect, natural direct effect and natural indirect effect, conditional on C = c, are given by

$$E[Y_{am} - Y_{a^*m}|c] = (\beta_1 + f_1(m) - f_2(m))(a - a^*),$$
(7)

$$E[Y_{aM_{a^*}} - Y_{a^*M_{a^*}}|c] = (\beta_1 + E[f_1(M)|a^*, c] - E[f_2(M)|a^*, c])(a - a^*), \qquad (8)$$

and

$$E[Y_{aM_a} - Y_{aM_{a^*}}|c] = a(E[f_1(M)|a,c] - E[f_1(M)|a^*,c]) + (1-a)(E[f_2(M)|a,c] - E[f_2(M)|a^*,c])$$
(9)

respectively.

According to Proposition 1, the expected CDE is a function of β_1 , β_2 and β_3 , the expected NDE is a function of β_1 , β_2 , β_3 , γ_0 , γ_1 , γ_2 and σ_2^2 , and the expected NIE is a function of β_2 , γ_0 , γ_1 , γ_2 and σ_2^2 . Thus, these mediation effects are derived by plugging in the suitable least squares or constrained estimators. We apply the delta method to

obtain the asymptotic variances of different mediation effects. All unknown parameters in the asymptotic variance expressions are replaced by the point estimates obtained from the least squares. The 95% confidence intervals are derived using the standard formula $(g(\hat{\theta}) - z_{0.975}\sqrt{var(g(\hat{\theta}))}, g(\hat{\theta}) + z_{0.975}\sqrt{var(g(\hat{\theta}))})$. The technical details are provided in Proposition 3 in the supplementary text, and the computational details are also provided in the supplementary text.

3 Simulation Study

We evaluate the performance of our methodology in terms of the coverage probability (or the probability that the 95% confidence interval contains the true mediation effect), average absolute relative bias and average mean squared error (MSE). Data were simulated to resemble the state-wide prenatal screening program data presented in the Application section (Section 4). The simulated data set contains 500 observations and 10 variables. The confounding variables are age (randomly sampled from 18 to 40 years with an increment 0.5 years), inverse maternal weight (randomly sampled from 0.0020 to 0.0143 $lbs^{-1} \times 10^3$ with an increment of 0.0001 $lbs^{-1} \times 10^3$), race (randomly sampled from race 1 to race 5 with probabilities 0.46, 0.28, 0.13, 0.1 and 0.03 respectively), season of blood draw (randomly sampled from season 1 to season 4 with the same probability 0.25), smoking status (randomly sampled from a binomial distribution with 5% chance of smoking), ovum donor status (randomly sampled from a binomial distribution with 2% chance of donation) and pre-existing diabetes status (randomly sampled from a binomial distribution with 5% chance of diabetes). The exposure variable is pesticide exposure (randomly sampled from a binomial distribution with 50% chance of being exposed). The mediator variable is hormone (gestational age multiple of median, calculated via exposure-mediator model). The outcome variable is birth weight (grams, calculated via exposure-outcome model).

We consider 3 different combinations of nonlinear functions for exposure-outcome model, which are shown in Figures 2a, 2c and 2e. We fix the variance of ϵ_2 in exposuremediator model (model (2)) at 0.3², and four different patterns of variances are considered for ϵ_1 in exposure-outcome model (model (1)), namely, $N(0, 10^2)$, $N(0, 20^2)$, $N(0, 30^2)$ and $N(0, 40^2)$. The number of bases is set to 5. For the CDE, the mediator is set to its mean value. Since in simulation studies all parameters such as β_1 , γ_0 , γ_1 , γ_2 and σ_2^2 and the functions $f_1(m)$ and $f_2(m)$ are known, the true effects can be calculated using the formulas in Proposition 3 to investigate the performance of the proposed methodology. The number of simulations considered is 500. The results of coverage probability are shown in Figures 2b, 2d and 2f ("LM" in the legend of each figure corresponds to the linear regression-based method and "GAM" in the legend of each figure corresponds to the GAM (simulation)-based method), and the results of average absolute relative bias and average MSE are shown in Figure S.1 in the supplementary text (also see Tables S.1 - S.3 in the supplementary text for details).

Under Pattern 1 (Figure 2a), the relationship between hormone and birth weight in the high exposure group is concave (with increasing trend) and the relationship in the low exposure group is increasing (sigmoid). The true CDE is centered at 44.62 (SD = (0.14), the true NDE is 45.82 and the true NIE is 1.10. The coverage probabilities of CDE, NDE and NIE remain at around 95% for the proposed method under different σ_1 's, but the coverage probabilities of CDE and NDE are low for the linear regressionbased method and the coverage probabilities of NDE are low for the GAM (simulation)based method, especially in the cases of small σ_1 's. The average absolute relative biases and the average MSEs for the proposed method are much lower than those for the linear regression-based or GAM (simulation)-based method. Under Pattern 2 (Figure 2c), the relationship between hormone and birth weight in the high exposure group is concave and the relationship in the low exposure group is concave (with decreasing trend). The true CDE is centered at 19.85 (SD = 0.05), the true NDE is 19.17 and the true NIE is -0.17. The coverage probabilities of CDE, NDE and NIE are approximately 95% for the proposed method. Although the coverage probabilities of the CDE and NDE for the linear regression-based method and the coverage probabilities of NDE for the GAM (simulation)-based method under Pattern 2 performed better than those under Pattern 1, they are still low in the cases of small σ_1 's. The average absolute relative biases for all methods converged as σ_1 increases. The average MSEs of CDE

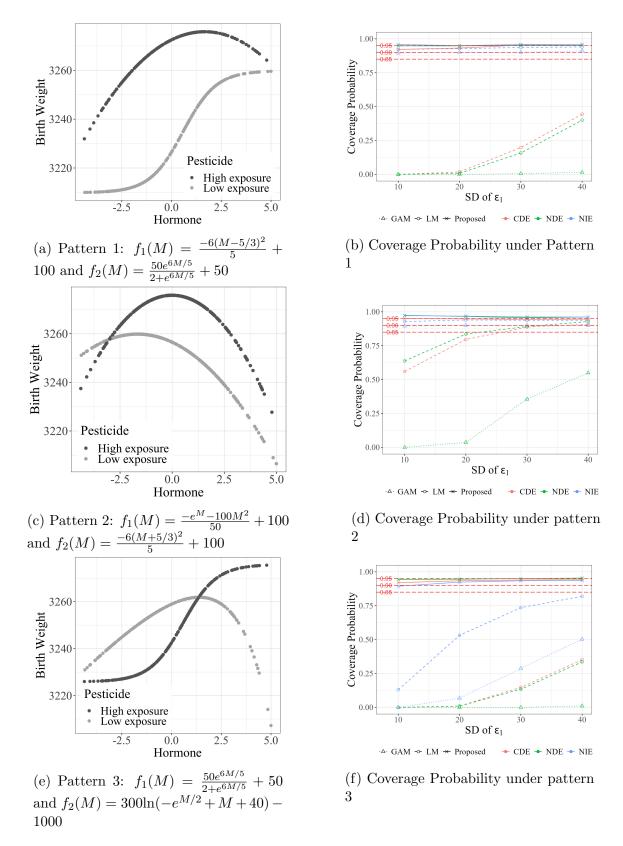


Figure 2: Plots of hormone vs. birth weight under each pattern, and simulation results of coverage probability for each pattern

and NDE for the linear regression-based method and the average MSEs of NDE for the GAM (simulation)-based method were lower under large σ_1 's. The reason could be that the estimations of effects do not deviate much from the truth for the linear regression-based or GAM (simulation)-based method. Under Pattern 3 (Figure 2e), the relationship between hormone and birth weight in the high exposure group is increasing (sigmoid) and the relationship in the low exposure group is concave. The true CDE is centered at -15.00 (SD = 0.14), the true NDE is -16.24 and the true NIE is 4.08. The coverage probabilities of CDE, NDE and NIE remain at approximately 95% for the proposed method under different σ_1 's, but the coverage probabilities of CDE, NDE and NIE are low for the linear regression-based method and the coverage probabilities of NDE and NIE are low for the GAM (simulation)-based method, especially in the cases of small σ_1 's. The average absolute relative biases and the average MSEs for the proposed method are notably lower than those for the linear regression-based method. The true NIE under Pattern 3 is larger than the true NIEs under other patterns in our simulation study. For this reason, the performance measures of NIE for the linear regression-based or GAM (simulation)-based method are worse.

In summary, if $f_1(M)$ and $f_2(M)$ deviate from linear shapes, the semi-parametric shape-restricted regression spline outperforms the linear regression or GAM (simulation) in general. Using the semi-parametric shape-restricted regression spline, the coverage probability stays constant at around 95%; whereas using the linear regression or GAM (simulation), the coverage probability tends to be 0 when the variance of ϵ_1 is small and the effect size is large (see Proposition 2). Both average absolute relative bias and average MSE of the estimated effects from the semi-parametric shape-restricted regression spline increase when the variance of ϵ_1 increase, but they are still smaller compared to the linear regression or GAM (simulation), especially for small variance of ϵ_1 and large effect size.

For a fair comparison, we have also assumed the true relationships between hormone and birth weight in high and low exposure groups as linear, i.e., $f_1(M) = 5.5M + 70$ and $f_2(M) = 9.5M + 60$, both increasing (see Figure 5a in the supplementary text). The true CDE is centered at 25.44 (SD = 0.05), the true NDE is 26.07, and the true NIE is 1.65. Because the underlying relationships are linear, the linear regression-based method performed better, as expected. The metrics are quite comparable to those from the semi-parametric shape-restricted regression spline (see Figure S.2 and Table S.4 in the supplementary text).

Proposition 2 If the mediation effect based on the linear regression model is different from the true mediation effect, then as the variance of $\epsilon_1 \rightarrow 0$, the coverage probability (or the probability that the confidence interval contains the true mediation effect) $\rightarrow 0$.

The proof of Proposition 2 can be found in the supplementary text.

4 Application

Pesticides are used widely in agriculture to control pests and improve yields. By design, they are toxic to insects and therefore we and others hypothesize unintended negative consequences on human health (Larsen et al., 2017). Larsen et al. (2017) reported that for individuals in a high pesticide exposure group (defined by pounds of pesticides applied in residential vicinity) in 1^{st} -trimester pregnancies, birth weight was 13 grams lower. Being in the high exposure group was associated with lower gestational age, higher risk of preterm birth and higher probability of a birth abnormality. Chemicals may not directly reach and/or affect the fetuses but instead they alter the levels of placental biomarkers which influence the birth outcomes. This is a placentally-mediated effect (Adibi et al., 2021a). It is also possible that the environmental chemical is associated with the outcome by way of a nonlinear relationship. Once in the body, some chemicals mimic naturally occurring hormones, prostaglandins, and/or growth factors (le Maire et al., 2010). To evaluate this, we performed mediation analysis using the semi-parametric shape-restricted regression analysis developed in this paper.

Pesticide data were publicly available through the California's Pesticide Use Reporting (PUR) program, where the pesticide application is reported daily. The data were mapped to the zip code of maternal residence, and to the month and year of blood draw. Each woman was assigned pesticide exposure values in log pounds of pesticides,

applied in that zip code during the month in which she had her blood drawn in the first trimester of pregnancy (10-14 weeks gestation). These data were merged with the prenatal screening data in which each woman had precise and accurate measures of placental-fetal hormones. Human chorionic gonadotropin (hCG) was selected as a mediator for this analysis as it is one of five placental-fetal biomarkers that is used widely to screen for fetal aneuploidy and therefore is available in the medical record for research (Malone et al., 2005). hCG is a placental glycoprotein that has been related to almost all placental functions including the transfer of nutrition, fetal growth and development (Filicori et al., 2005, Licht et al., 2007). hCG has also been widely associated with environmental exposures including pesticides (Paulesu et al., 2018, Adibi et al., 2021b). Furthermore, Barjaktarovic et al. (2017) demonstrated in Generation R that hCG in the late first trimester was associated with birth weight in a sex-specific and nonlinear pattern. The pesticide application data was dichotomized at the median to represent low and high exposure categories (A). We focused on two commonly used pesticides, namely, permethrin and glyphosate isopropylamine salt. The mediator (M)was her serum level human chorionic gonadotropin (hCG), normalized for gestational day of blood draw which is called the gestational age multiple of the median (GA-MoM) (Adibi et al., 2015). The outcome variable (Y) was neonatal birth weight which was abstracted from the medical record for each baby. Analyses were stratified by baby sex due to previous reports on a sex difference in the hCG-birth weight association (Barjaktarovic et al., 2017). All models were adjusted for a small set of confounders of exposure-outcome, exposure-mediator, and mediator-outcome that included maternal race, year of blood draw, month of blood draw, smoking status, ovum donor status, pre-existing diabetes status, maternal age and inverse maternal weight (Adibi et al., 2015). Information on confounders was limited to a one-page questionnaire which is completed by subjects at the time of blood draw. The DAG is shown in Figure 3.

For the organophosphate pesticide permethrin $(N_{male} = 21, 433, N_{female} = 20, 895)$, the association between first trimester hCG and neonatal male birth weight was increasing in the above-median exposure group and concave with an increasing trend in

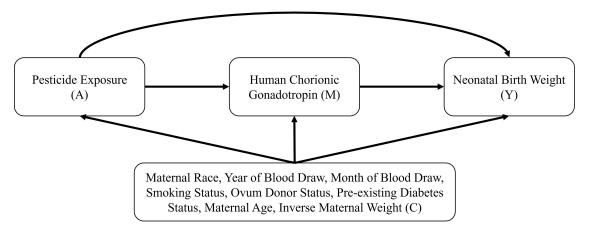


Figure 3: The directed acyclic graph (DAG) for the analysis

the below-median exposure group. The relationship between first trimester hCG and neonatal female birth weight was concave with an increasing trend in the above-median exposure group and increasing in the below-median exposure group. For glyphosate isopropylamine salt ($N_{male} = 56, 299, N_{female} = 55, 052$), the relationship between first trimester hCG and infant male birth weight was concave with an increasing trend in the above-median exposure group and increasing in the below-median exposure group. The relationship between first trimester hCG and infant female birth weight was increasing in the above-median exposure group and concave with increasing trend in the below-median exposure group. Mediation analysis was performed using the semiparametric shape-restricted regression spline. The number of bases was set to 5 as in the simulation study and the confounding variables were controlled at their mean values. For the CDE, the mediator was set to its mean value. The results are summarized in Table 1.

According to the results summarized in Table 1, the NIE is statistically significant at 5% level of significance in each case as the 95% confidence intervals do not include the null value, indicating that first trimester hCG was in an association pathway between permethrin and glyphosate isopropylamine salt exposure and birth weight within male and female infants in this cohort. In our analysis, we discovered positive associations between permethrin and birth weight and between glyphosate isopropylamine salt and birth weight. After accounting for mediation, these associations became negative. It

	Female Infant									
	CDE with 95% C.I.	NDE with 95% C.I.	NIE with 95% C.I.							
permethrin	13.270	6.7042	-1.1889							
permetini	(-4.0927, 30.633)	(-5.2455, 18.654)	(-2.0636, -0.3142)							
glyphosate	4.9524	8.8868	-1.6303							
isopropylamine salt	(-6.9646, 16.869)	(-11.683, 29.457)	(-2.2427, -1.0178)							
	Male Infant									
	CDE with 95% C.I.	NDE with 95% C.I.	NIE with 95% C.I.							
permethrin	12.454	15.665	-2.4189							
permetinin	(-3.5468, 28.455)	(3.5325, 27.797)	(-3.5479, -1.2899)							
glyphosate	8.0234	5.8625	-2.4338							
isopropylamine salt	(-3.0360, 19.083)	(-1.6837, 13.409)	(-3.1993, -1.6683)							

Table 1: Mediation Analysis Results on State-Wide Prenatal Screening Program Data

is important to note that pesticide exposure is based on application of pesticides and geographic proximity. Results can be interpreted at the aggregate level of women living in geographic proximity to specific levels of pesticide application in early pregnancy. At the individual level, misclassification of internal pesticide dose is likely.

5 Discussion

The methodology presented here solves a problem in the setting of causal mediation analysis where there is a known or suspected nonlinear relationship between the mediator and the outcome. This method is designed to relax the linearity assumption and reduce bias introduced by model misspecification. The exposure-outcome model is specified using the quadratic I-spline basis functions and/or cubic C-spline basis functions. This allows the investigator to apply pre-existing knowledge on the underlying nonlinear relationship to their analysis. Once the shapes of the associations are established, the mediation effects can be estimated and inferred.

We demonstrate the proposed method in an applied example in environmental health and fetal origins epidemiology. In the case of placental-fetal biomarkers and fetal growth, nonlinearity is a reasonable assumption. We found that the shapes of the placental biomarker-birth weight relationships differed by the low and high pesticide application groups. One interpretation is that the shape of association in the low exposure group more closely represents the "normal" developmental relationship, and the changing of that shape in the high exposure group could indicate a type of toxicity. This information was accounted for in the estimation of the controlled direct effect (the exposure effect when hypothetically blocking the effect of the mediator), the natural direct effect (the exposure effect when assuming the mediator was unaffected by exposure), and the natural indirect effect (the effect of exposure assuming mediation). In this case, it allowed for comparisons of effect magnitude, direction, and precision of the effect across different pesticides and hormones, stratified by sex of the infant.

As shown in the Application section (Section 4), the estimation of the natural indirect effect changed the interpretation of the exposure effect. Based on the natural direct effect alone, the conclusion was that the pesticide application was either not or positively associated with the birth weight. However, based on the natural indirect effect and the consideration of the shapes, the conclusion was that the increased pesticide application would lead to the lower birth weight. This question as to whether the true exposure effect is positive or negative in direction can be further explored in studies where exposures are measured in individual pregnancies by pesticide biomarkers. A possible explanation is that the placental mechanism of toxicity differs from the direct effect, and both directions of association (positive natural direct effect and negative natural indirect effect) may be accurate. It is also important to note that, if the relationships are modeled using standard linear models, then from equations $E[Y_{aM_{a^*}} - Y_{a^*M_{a^*}}|c] = (\beta_1 + \beta_3(\gamma_0 + \gamma_1 a^* + \gamma_2 c))(a - a^*)$ and $E[Y_{aM_a} - Y_{aM_{a^*}}|c] = (\beta_2\gamma_1 + \beta_3\gamma_1 a)(a - a^*)$ (VanderWeele, 2015), we see that under some conditions on the model parameters, E(NDE) > 0 > E(NIE). This can happen, for example, when in the exposure-outcome model, the exposure, the mediator as well as the interaction between the exposure and the mediator are positively correlated with the outcome. Conversely, in the exposure-mediator model, the confounders and the mediator are positively correlated while the exposure and the mediator are negatively correlated. There are potentially other configurations leading to E(NDE) > 0 > E(NIE). Thus, it should not be surprising if in practice, whether we use the linear or the proposed shape-restricted regression, the natural direct effect and the natural indirect effect have opposite signs as seen in our example.

Using these estimation methods in the causal inference framework requires consideration of specific sources of bias and rigorous validation of the necessary assumptions including no unmeasured confounding, consistency, positivity, and no interference. Correct model specification is a required assumption in this framework, which is addressed in this method. Detailed discussion of these assumptions and approaches to validate them are outside the scope of this paper and are described in detail elsewhere (Hernan and Robins, 2020, Nguyen et al., 2021).

The proposed method performed as desired in terms of coverage probability, average absolute relative bias and average mean squared error based on the simulation results. This was true especially when the underlying shape was nonlinear with a specific shape being identified. Standard linear or polynomial regressions are rigid in shapes, so the corresponding 95% confidence intervals barely covered the true effect. The proposed method also avoids the common problems in GAMs, i.e., the curse of dimensionality, computational intensity, etc. Due to the flexibility offered by GAMs, the associations may be unstable and interpretation can become challenging. Because the proposed method is developed using the asymptotic properties of the regression, it is not computationally intensive. The proposed method is a compromise between the standard linear or polynomial regressions and GAMs because it does not require a specific functional relationship nor does it allow arbitrary relationships. Although the fits are robust to the choice of smoothing parameters when assumptions about both shape and smoothness are warranted (Meyer, 2008), in order to make more precise predictions, the number of knots and the knots placement may still need to be considered. See for example, Jelsema et al. (2019). The proposed method is not suitable if shapes other than monotonic, convex and concave are present. In such cases, researchers can apply the simulation-based method developed by Imai et al. (2010). The proposed method only accommodates a categorical exposure variable. This is a limitation to be addressed in the future extension of this approach.

Acknowledgements

The authors QY and JJA gratefully acknowledge the funding from the National Institute of Environmental Health Sciences (NIEHS 5R01ES029336). The research of SDP was funded by the Intramural Research Program of the *Eunice Kennedy Shriver* National Institute of Child Health and Human Development (NICHD), National Institutes of Health, Bethesda, MD. We acknowledge Drs. Sona Saha and Robert Currier of the Genetic Disease Screening Program (GDSP) of the California Department of Public Health (CDPH) for their support of this collaboration. We thank Dr. Jane Clougherty (Drexel University) and Ms. Ellen Kinnee (University of Pittsburgh) for their work to assign pesticide application exposures (PUR data) to individual pregnancies (GDSP data) based on different geo-spatial units. We thank Dr. Jiebiao Wang (University of Pittsburgh) for his comments and help on this paper.

References

- J. J. Adibi, M. K. Lee, S. Saha, W. J. Boscardin, A. Apfel, and R. J. Currier. Fetal sex differences in human chorionic gonadotropin fluctuate by maternal race, age, weight and by gestational age. *Journal of developmental origins of health and disease*, 6(6): 493–500, 2015.
- J. J. Adibi, A. J. Layden, R. L. Birru, A. Miragaia, X. Xun, M. C. Smith, Q. Yin, M. E. Millenson, T. G. O'Connor, E. S. Barrett, N. W. Snyder, S. Peddada, and R. T. Mitchell. First trimester mechanisms of gestational sac placental and foetal teratogenicity: a framework for birth cohort studies. *Human reproduction update*, 27(4):747–770, 2021a.
- J. J. Adibi, A. J. Layden, Q. Yin, X. Xun, S. Peddada, and R. L. Birru. A toolkit for the application of placental-fetal molecular biomarkers in epidemiologic studies of the fetal origins of chronic disease. *Current Epidemiology Reports*, 8(1):20–31, 2021b.
- M. Barjaktarovic, T. I. Korevaar, V. W. Jaddoe, Y. B. de Rijke, T. J. Visser, R. P.

Peeters, and E. A. Steegers. Human chorionic gonadotropin (hcg) concentrations during the late first trimester are associated with fetal growth in a fetal sex-specific manner. *European journal of epidemiology*, 32(2):135–144, 2017.

- D. J. P. Barker. The developmental origins of adult disease. European Journal of Epidemiology, 18(8):733–736, 2003.
- D. J. P. Barker and K. L. Thornburg. Placental programming of chronic diseases, cancer and lifespan: A review. *Placenta*, 34(10):841–845, 2013.
- R. M. Baron and D. A. Kenny. The moderator-mediator variable distinction in social psychological research: conceptual, strategic, and statistical considerations. *Journal* of personality and social psychology, 51(6):1173–1182, 1986.
- K. Benirschke and P. Kaufmann. Pathology of the human placenta. Springer, New York, 2000.
- H. B. Curry and I. J. Schoenberg. On pólya frequency functions iv: The fundamental spline functions and their limits. *Journal d'Analyse Mathematique*, 17:71–107, 1966.
- M. Filicori, A. T. Fazleabas, I. Huhtaniemi, P. Licht, C. Rao, J. Tesarik, and M. Zygmunt. Novel concepts of human chorionic gonadotropin: reproductive system interactions and potential in the management of infertility. *Fertility and sterility*, 84(2): 275–284, 2005.
- M. A. Hernan and J. M. Robins. *Causal Inference: What If.* Boca Raton: Chapman & Hall/CRC, 2020.
- H. W. Hoek, A. S. Brown, and E. Susser. The dutch famine and schizophrenia spectrum disorders. Social Psychiatry and Psychiatric Epidemiology, 33(8):373–379, 1998.
- K. Imai, L. Keele, and D. Tingley. A general approach to causal mediation analysis. *Psychological Methods*, 15(4):309–334, 2010.

- C. M. Jelsema, R. K. Kwok, and S. D. Peddada. Threshold knot selection for largescale spatial models with applications to the deepwater horizon disaster. *Journal of statistical computation and simulation*, 89(11):2121–2137, 2019.
- A. E. Larsen, S. D. Gaines, and O. Deschênes. Agricultural pesticide use and adverse birth outcomes in the san joaquin valley of california. *Nature Communications*, 8 (1):302, 2017.
- A. le Maire, W. Bourguet, and P. Balaguer. A structural view of nuclear hormone receptor: endocrine disruptor interactions. *Cellular and Molecular Life Sciences*, 67 (8):1219–1237, 2010.
- L. Li, M. E. Andersen, S. Heber, and Q. Zhang. Non-monotonic dose-response relationship in steroid hormone receptor-mediated gene expression. *Journal of molecular* endocrinology, 38(5):569–585, 2007.
- P. Licht, H. Fluhr, J. Neuwinger, D. Wallwiener, and L. Wildt. Is human chorionic gonadotropin directly involved in the regulation of human implantation? *Molecular* and cellular endocrinology, 269(1-2):85–92, 2007.
- F. D. Malone, J. A. Canick, R. H. Ball, D. A. Nyberg, C. H. Comstock, R. Bukowski, R. L. Berkowitz, S. J. Gross, L. Dugoff, S. D. Craigo, I. E. Timor-Tritsch, S. R. Carr, H. M. Wolfe, K. Dukes, D. W. Bianchi, A. R. Rudnicka, A. K. Hackshaw, G. Lambert-Messerlian, N. J. Wald, and M. E. D'Alton. First-trimester or second-trimester screening, or both, for down's syndrome. *New England Journal of Medicine*, 353(19):2001–2011, 2005.
- S. May and C. Bigelow. Modeling nonlinear dose-response relationships in epidemiologic studies: Statistical approaches and practical challenges. *Dose-Response*, 3(4): 474–90, 2005.
- M. C. Meyer. Inference using shape-restricted regression splines. Annals of Applied Statistics, 2(3):1013–1033, 2008.

- M. C. Meyer. A simple new algorithm for quadratic programming with applications in statistics. *Communications in Statistics - Simulation and Computation*, 42(5): 1126–1139, 2013.
- M. C. Meyer. Constrained partial linear regression splines. Statistica Sinica, 28(1): 277–292, 2018.
- T. Q. Nguyen, I. Schmid, and E. A. Stuart. Clarifying causal mediation analysis for the applied researcher: Defining effects based on what we want to learn. *Psychological methods*, 26(2):255–271, 2021.
- L. Paulesu, C. V. Rao, F. Ietta, A. Pietropolli, and C. Ticconi. hcg and its disruption by environmental contaminants during human pregnancy. *International journal of molecular sciences*, 19(3):914, 2018.
- J. O. Ramsay. Monotone regression splines in action. Statistical Science, 3(4):425–461, 1988.
- D. Tingley, T. Yamamoto, K. Hirose, L. Keele, and K. Imai. mediation: R package for causal mediation analysis. *Journal of Statistical Software*, 59(5):1–38, 2014.
- A. F. M. van Abeelen, S. R. de Rooij, C. Osmond, R. C. Painter, M. V. E. Veenendaal, P. M. M. Bossuyt, S. G. Elias, D. E. Grobbee, Y. T. van der Schouw, D. J. P. Barker, and T. J. Roseboom. The sex-specific effects of famine on the association between placental size and later hypertension. *Placenta*, 32(9):694–698, 2011.
- L. N. Vandenberg, T. Colborn, T. B. Hayes, J. J. Heindel, D. R. J. Jacobs, D.-H. Lee, J. P. Myers, T. Shioda, A. M. Soto, F. S. vom Saal, W. V. Welshons, and R. T. Zoeller. Regulatory decisions on endocrine disrupting chemicals should be based on the principles of endocrinology. *Reproductive Toxicology*, 38:1–15, 2013.
- T. J. VanderWeele. Explanation In Causal Inference : Methods for Mediation and Interaction. Oxford University Press, New York, 2015.

Q. Yin, X. Xun, S. Peddada, and J. J. Adibi. Shape detection using semi-parametric shape-restricted mixed effects regression spline with applications. *Sankhya B*, 83 (S1):65–85, 2021.

Supplementary Text

S.1. M-splines, I-splines and C-splines

Let $t = \{t_1, t_2, ..., t_{n+k}\}$ denote the knot sequence, n denote the number of free parameters that specify the spline function having the specified continuity characteristics, and k be the order of the basis functions. Then the recursive form of M-splines is as follows (Ramsay, 1988):

For order k = 1, $M_i(x|1, t) = \frac{1}{t_{i+1}-t_i}$ if $t_i \le x < t_{i+1}$, otherwise $M_i(x|1, t) = 0$, and for order k > 1, $M_i(x|k, t) = \frac{k[(x-t_i)M_i(x|k-1,t)+(t_{i+k}-x)M_{i+1}(x|k-1,t)]}{(k-1)(t_{i+k}-t_i)}$ if $t_i \le x < t_{i+k}$, otherwise $M_i(x|k, t) = 0$.

The quadratic I-splines $I_i(x|2,t)$ are obtained by integrating the M-splines of degree 1 and can be expressed as:

$$I_{i}(x|2,t) = 0 \text{ if } x < t_{i},$$

$$I_{i}(x|2,t) = \frac{(x-t_{i})^{2}}{(t_{i+2}-t_{i})(t_{i+1}-t_{i})} \text{ if } t_{i} \le x < t_{i+1},$$

$$I_{i}(x|2,t) = 1 - \frac{(t_{i+2}-x)^{2}}{(t_{i+2}-t_{i})(t_{i+2}-t_{i+1})} \text{ if } t_{i+1} \le x < t_{i+2}, \text{ and}$$

$$I_{i}(x|2,t) = 1 \text{ if } x \ge t_{i+2}.$$

The cubic C-splines $C_i(x|2, t)$ are obtained by integrating the quadratic I-splines and can be expressed as:

$$C_{i}(x|2,t) = 0 \text{ if } x < t_{i},$$

$$C_{i}(x|2,t) = \frac{(x-t_{i})^{3}}{3(t_{i+2}-t_{i})(t_{i+1}-t_{i})} \text{ if } t_{i} \le x < t_{i+1},$$

$$C_{i}(x|2,t) = x - \frac{t_{i}+t_{i+1}+t_{i+2}}{3} + \frac{(t_{i+2}-x)^{3}}{3(t_{i+2}-t_{i})(t_{i+2}-t_{i+1})} \text{ if } t_{i+1} \le x < t_{i+2}, \text{ and}$$

$$C_{i}(x|2,t) = x - \frac{t_{i}+t_{i+1}+t_{i+2}}{3} \text{ if } x \ge t_{i+2}.$$

S.2. Proof of Proposition 1

Proof. Under the conditions described in Proposition 1, and with the models (1) and (2) being correctly specified, we obtain after some simplifications:

$$E[CDE|c] = E[Y_{am} - Y_{a^*m}|c] = E[Y|a, m, c] - E[Y|a^*, m, c] = (\beta_1 + f_1(m) - f_2(m))(a - a^*),$$

$$\begin{split} E[NDE|c] &= E[Y_{aM_{a^*}} - Y_{a^*M_{a^*}}|c] = \int_m \{E[Y|a, m, c] - E[Y|a^*, m, c]\}f(m|a^*, c)dm \\ &= (\beta_1 + E[f_1(M)|a^*, c] - E[f_2(M)|a^*, c])(a - a^*), \text{ and} \\ E[NIE|c] &= E[Y_{aM_a} - Y_{aM_{a^*}}|c] = \int_m E[Y|a, m, c]\{f(m|a, c) - f(m|a^*, c)\}dm \\ &= a(E[f_1(M)|a, c] - E[f_1(M)|a^*, c]) + (1 - a)(E[f_2(M)|a, c] - E[f_2(M)|a^*, c]). \end{split}$$

Let the knot sequence be $L = t_1 = t_2 < t_3 < ... < t_k < t_{k+1} = t_{k+2} = U$. If $f_1(M)$ is fitted using I-splines, then $f_1(M) = \beta_{21}I_1(M|2,t) + ... + \beta_{2k}I_k(M|2,t)$. This is a piece-wise function, where, for $t_k \leq M < t_{k+1}$, $f_1(M) = \beta_{21} + ... + \beta_{2,k-2} + \beta_{2,k-1}(1 - \frac{(t_{k+1}-M)^2}{(t_{k+1}-t_k)(t_{k+1}-t_{k-1})}) + \beta_{2,k}(\frac{(M-t_k)^2}{(t_{k+1}-t_k)(t_{k+2}-t_k)})$. Then conditional on a and c we obtain:

 $E[f_1(M)|a,c] = \int_m (\beta_{21}I_1(m|2,t) + \dots + \beta_{2k}I_k(m|2,t))f(m|a,c)dm = \sum_{i=2}^k \{\int_{t_i}^{t_{i+1}} [\beta_{21} + \dots + \beta_{2,i-2} + \beta_{2,i-1}(1 - \frac{(t_{i+1}-m)^2}{(t_{i+1}-t_i)(t_{i+1}-t_{i-1})}) + \beta_{2,i}(\frac{(m-t_i)^2}{(t_{i+1}-t_i)(t_{i+2}-t_i)})]f(m|a,c)dm\}, \text{ where } f(m|a,c) \text{ denotes normal density with mean } \gamma_0 + \gamma_1 a + \gamma_2 c \text{ and variance } \sigma_2^2.$ Similar expressions can be derived for $f_2(M)$ and $E[f_2(M)|a,c].$

If $f_1(M)$ is fitted using C-splines, then $f_1(M) = \beta_{20}M + \beta_{21}C_1(M|2,t) + \dots + \beta_{2k}C_k(M|2,t)$, which is also a piece-wise function. For either $M < t_2$ or $M \ge t_{k+1}$, $f_1(M) = \beta_{20}M$. For $t_k \le M < t_{k+1}$, $f_1(M) = \beta_{20}M + \beta_{21}(M - \frac{t_1 + t_2 + t_3}{3}) + \dots + \beta_{2,k-2}(M - \frac{t_{k-2} + t_{k-1} + t_k}{3}) + \beta_{2,k-1}(m - \frac{t_{k-1} + t_k + t_{k+1}}{3}) + \frac{(t_{k+1} - m)^3}{3(t_{k+1} - t_k)(t_{k+1} - t_{k-1})}) + \beta_{2,k}(\frac{(m - t_k)^3}{3(t_{k+1} - t_k)(t_{k+2} - t_k)})$. Then conditional on a and c we obtain:

$$E[f_1(M)|a,c] = \int_m (\beta_{20}m + \beta_{21}C_1(m|2,t) + \dots + \beta_{2k}C_k(m|2,t))f(m|a,c)dm = \beta_{20}(\gamma_0 + \gamma_1a + \gamma_2c) + \sum_{i=2}^k \{\int_{t_i}^{t_{i+1}} [\beta_{21}(m - \frac{t_1 + t_2 + t_3}{3}) + \dots + \beta_{2,i-2}(m - \frac{t_{i-2} + t_{i-1} + t_i}{3}) + \beta_{2,i-1}(m - \frac{t_{i-1} + t_i + t_{i+1}}{3} + \frac{(t_{i+1} - m)^3}{3(t_{i+1} - t_i)(t_{i+1} - t_{i-1})}) + \beta_{2,i}(\frac{(m - t_i)^3}{3(t_{i+1} - t_i)(t_{i+2} - t_i)})]f(m|a,c)dm\}.$$

Similar expressions can be derived for $f_2(M)$ and $E[f_2(M)|a,c]$.

S.3. Proposition 3

Proposition 3. Let $\theta_{CDE} = (\beta_1, \beta_2, \beta_3)$, $\theta_{NDE} = (\beta_1, \beta_2, \beta_3, \gamma_0, \gamma_1, \gamma_2, \sigma_2^2)$ and $\theta_{NIE} = (\beta_2, \gamma_0, \gamma_1, \gamma_2, \sigma_2^2)$, where $\beta_2 = (\beta_{21}, ..., \beta_{2k})$ and $\beta_3 = (\beta_{31}, ..., \beta_{3k})$ in case of quadratic I-splines, and $\beta_2 = (\beta_{20}, \beta_{21}, ..., \beta_{2k})$ and $\beta_3 = (\beta_{30}, \beta_{31}, ..., \beta_{3k})$ in case of cubic C-splines.

Denote the expected controlled direct effect as $g_{CDE}(\theta_{CDE})$, the expected natural direct effect as $g_{NDE}(\theta_{NDE})$ and the expected natural indirect effect as $g_{NIE}(\theta_{NIE})$. Then the asymptotic variances of expected CDE, NDE and NIE are $\nabla_{\theta_{CDE}}g_{CDE}(\theta_{CDE})^T \Sigma_{\theta_{CDE}}\nabla_{\theta_{CDE}}g_{CDE}(\theta_{CDE})$, $\nabla_{\theta_{NDE}}g_{NDE}(\theta_{NDE})^T \Sigma_{\theta_{NDE}}\nabla_{\theta_{NDE}}g_{NDE}(\theta_{NDE})$ and $\nabla_{\theta_{NIE}}g_{NIE}(\theta_{NIE})^T \Sigma_{\theta_{NIE}}\nabla_{\theta_{NIE}}g_{NIE}(\theta_{NIE})$ respectively, where $\Sigma_{\theta_{CDE}}$, $\Sigma_{\theta_{NDE}}$ and $\Sigma_{\theta_{NIE}}$ are the covariance matrices corresponding to the estimated θ_{CDE} , θ_{NDE} and θ_{NIE} .

If $f_1(M)$ is fitted using I-splines, then:

$$\frac{\partial E[f_1(M)|a,c]}{\partial \beta_{2i}} = \int_{t_i}^{t_{i+1}} \frac{(m-t_i)^2}{(t_{i+1}-t_i)(t_{i+2}-t_i)} f(m|a,c) dm + \int_{t_{i+1}}^{t_{i+2}} (1 - \frac{(t_{i+2}-m)^2}{(t_{i+2}-t_{i+1})(t_{i+2}-t_i)}) f(m|a,c) dm + \int_{t_{i+2}}^{t_{i+3}} f(m|a,c) dm + \dots + \int_{t_k}^{t_{k+1}} f(m|a,c) dm, \text{ for } i = 1, 2, \dots, k,$$

$$\begin{split} \frac{\partial E[f_1(M)|a,c]}{\partial \gamma_0} &= \sum_{i=2}^k \{\int_{t_i}^{t_{i+1}} \big[\beta_{21} + \ldots + \beta_{2,i-2} + \beta_{2,i-1} \big(1 - \frac{(t_{i+1}-m)^2}{(t_{i+1}-t_i)(t_{i+1}-t_{i-1})}\big) + \beta_{2,i} \big(\frac{(m-t_i)^2}{(t_{i+1}-t_i)(t_{i+2}-t_i)}\big)\big] \\ &= f(m|a,c) \frac{2(m-(\gamma_0+\gamma_1a+\gamma_2c)}{2\sigma_2^2} dm\}, \end{split}$$

$$\begin{aligned} &\frac{\partial E[f_1(M)|a,c]}{\partial \sigma_2^2} = \sum_{i=2}^k \{\int_{t_i}^{t_{i+1}} [\beta_{21} + \ldots + \beta_{2,i-2} + \beta_{2,i-1} (1 - \frac{(t_{i+1}-m)^2}{(t_{i+1}-t_i)(t_{i+1}-t_{i-1})}) + \\ &\beta_{2,i} (\frac{(m-t_i)^2}{(t_{i+1}-t_i)(t_{i+2}-t_i)})]f(m|a,c) (-\frac{1}{2\sigma_2^2} + \frac{(m-(\gamma_0+\gamma_1a+\gamma_2c))^2}{2(\sigma_2^2)^2})dm\}. \end{aligned}$$

Similar expressions can be derived for $\frac{\partial E[f_1(M)|a,c]}{\partial \gamma_1}$ and $\frac{\partial E[f_1(M)|a,c]}{\partial \gamma_2}$.

If $f_1(M)$ is fitted using C-splines, then:

$$\begin{split} \frac{\partial E[f_1(M)|a,c]}{\partial \beta_{20}} &= \gamma_0 + \gamma_1 a + \gamma_2 c, \\ \frac{\partial E[f_1(M)|a,c]}{\partial \beta_{2i}} &= \int_{t_i}^{t_{i+1}} \frac{(m-t_i)^3}{3(t_{i+1}-t_i)(t_{i+2}-t_i)} f(m|a,c) dm + \int_{t_{i+1}}^{t_{i+2}} (m - \frac{t_i + t_{i+1} + t_{i+2}}{3} + \frac{(t_{i+2} - m)^3}{3(t_{i+2} - t_{i+1})(t_{i+2} - t_i)}) f(m|a,c) dm + \dots \\ \int_{t_{i+2}}^{t_{i+3}} (m - \frac{t_i + t_{i+1} + t_{i+2}}{3}) f(m|a,c) dm + \dots + \int_{t_k}^{t_{k+1}} (m - \frac{t_i + t_{i+1} + t_{i+2}}{3}) f(m|a,c) dm, \text{ for } i = 1, 2, \dots, k \\ \frac{\partial E[f_1(M)|a,c]}{\partial \gamma_0} &= \beta_{20} + \sum_{i=2}^k \{\int_{t_i}^{t_{i+1}} [\beta_{21}(m - \frac{t_1 + t_2 + t_3}{3}) + \dots + \beta_{2,i-2}(m - \frac{t_{i-2} + t_{i-1} + t_i}{3}) + \beta_{2,i-1}(m - \frac{t_{i-1} + t_i + t_{i+1}}{3}) + \frac{(t_{i+1} - m)^3}{3(t_{i+1} - t_i)(t_{i+1} - t_{i-1})}) + \beta_{2,i}(\frac{(m - t_i)^3}{3(t_{i+1} - t_i)(t_{i+2} - t_i)})]f(m|a,c)\frac{2(m - (\gamma_0 + \gamma_1 a + \gamma_2 c)}{2\sigma_2^2}) dm\}, \\ \frac{\partial E[f_1(M)|a,c]}{\partial \sigma_2^2} &= \sum_{i=2}^k \{\int_{t_i}^{t_{i+1}} [\beta_{21}(m - \frac{t_1 + t_2 + t_3}{3}) + \dots + \beta_{2,i-2}(m - \frac{t_{i-2} + t_{i-1} + t_i}{3}) + \beta_{2,i-1}(m - \frac{t_{i-1} + t_i + t_{i+1}}{3} + \frac{(t_{i+1} - m)^3}{3(t_{i+1} - t_i)(t_{i+1} - t_{i-1})}) + \beta_{2,i}(\frac{(m - t_i)^3}{3(t_{i+1} - t_i)(t_{i+2} - t_i)})]f(m|a,c)(-\frac{1}{2\sigma_2^2} + \frac{(m - (\gamma_0 + \gamma_1 a + \gamma_2 c))^2}{2(\sigma_2^2)^2}) dm\}. \end{split}$$

Similarly expressions can be derived for $\frac{\partial E[f_1(M)|a,c]}{\partial \gamma_1}$ and $\frac{\partial E[f_1(M)|a,c]}{\partial \gamma_2}$.

S.4. Proof of Proposition 2

Proof. Using linear regression, the exposure-outcome model is expressed as

$$Y = \beta_0 + \beta_1 A + \beta_2 M + \beta_3 A M + \beta_4 C + \epsilon_1 \tag{S.1}$$

where $\epsilon_1 \sim N(0, \sigma_1^2)$, while the exposure-mediator model keeps the same as model (2). Then the expected CDE, NDE and NIE, conditioning on C = c, are given by

$$E[Y_{am} - Y_{a^*m}|c] = (\beta_1 + \beta_3 m)(a - a^*),$$
(S.2)

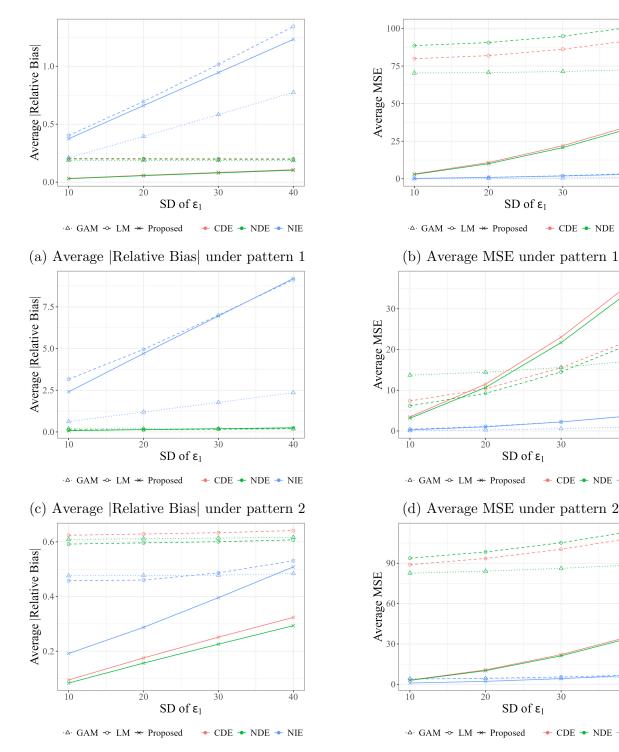
$$E[Y_{aM_{a^*}} - Y_{a^*M_{a^*}}|c] = (\beta_1 + \beta_3(\gamma_0 + \gamma_1 a^* + \gamma_2 c))(a - a^*),$$
(S.3)

and

$$E[Y_{aM_a} - Y_{aM_{a^*}}|c] = (\beta_2 \gamma_1 + \beta_3 \gamma_1 a)(a - a^*),$$
(S.4)

respectively. Let X = [1, A, M, AM, C], then $\hat{\beta} \sim N(\beta, \sigma_1^2 (X^T X)^{-1})$. The expected CDE, NDE and NIE can all be expressed as a linear combination of β . Assuming $\hat{\theta}_{LR} = a\hat{\beta} \sim N(a\beta, \sigma_1^2 a (X^T X)^{-1} a^T)$, then we obtain $P(|\hat{\theta}_{LR} - \theta_{true}| \leq z_{\alpha/2} \sqrt{Var(\hat{\theta}_{LR})}) = \phi(z_{\alpha/2} + \frac{\theta_{true} - \theta_{LR}}{\sigma_1 \sqrt{a(X^T X)^{-1} a^T}}) - \phi(-z_{\alpha/2} + \frac{\theta_{true} - \theta_{LR}}{\sigma_1 \sqrt{a(X^T X)^{-1} a^T}})$, where $\phi(\cdot)$ denotes normal density function. Therefore, if $\theta_{true} \neq \theta_{LR}$ then as $\sigma_1 \to 0$, the coverage probability $\to 0$.

S.5. Simulation results of average absolute relative bias and average



MSE for each pattern

(e) Average |Relative Bias| under pattern 3

(f) Average MSE under pattern 3

30

30

30

← CDE ← NDE ← NIE

← CDE ← NDE ← NIE

← CDE ← NDE ← NIE

40

40

Figure S.1: Simulation results of average absolute relative bias and average MSE for each pattern

S.6. Plots of hormone vs. birth weight under linear pattern and simulation results for linear pattern

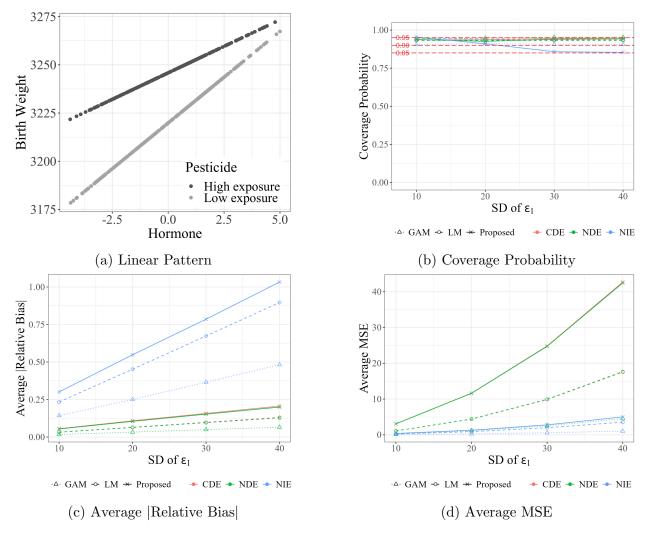


Figure S.2: Plots of hormone vs. birth weight under linear pattern, and simulation results of coverage probability, average absolute relative bias and average MSE for linear pattern

S.7. Tables of Simulation Results

Semi-parametric shape-restricted regression spline										
Variance of ϵ_1	Coverage Probability			Averag	ge Relat	tive Bias	Average MSE			
	CDE	NDE	NIE	CDE	NDE	NIE	CDE	NDE	NIE	
10^{2}	0.922	0.948	0.958	0.032	0.030	0.374	3.223	2.879	0.281	
20^{2}	0.932	0.948	0.950	0.059	0.056	0.661	10.808	10.030	0.902	
30^{2}	0.954	0.952	0.958	0.084	0.080	0.945	21.982	20.739	1.852	
40^{2}	0.952	0.952	0.960	0.108	0.103	1.232	36.465	34.837	3.129	
	Linear regression									
Variance of ϵ_1	Covera	age Prol	oability	Averag	ge Relat	tive Bias	Average MSE			
	CDE	NDE	NIE	CDE	NDE	NIE	CDE	NDE	NIE	
10^{2}	0.000	0.000	0.922	0.199	0.204	0.402	79.924	88.628	0.312	
20^{2}	0.018	0.008	0.928	0.197	0.203	0.696	81.953	90.648	0.959	
30^{2}	0.198	0.158	0.936	0.196	0.201	1.016	86.176	94.878	2.048	
40^{2}	0.444	0.400	0.940	0.195	0.200	1.343	92.594	101.316	3.580	
			General	lized ad	ditive m	odel				
Variance of ϵ_1	Covera	age Prol	oability	Average Relative Bias			Average MSE			
	CDE	NDE	NIE	CDE	NDE	NIE	CDE	NDE	NIE	
10^{2}	-	0.000	0.895	-	0.188	0.210	-	70.406	0.072	
20^{2}	-	0.000	0.901	-	0.187	0.394	-	70.662	0.257	
30^{2}	-	0.005	0.901	-	0.186	0.583	-	71.381	0.565	
40^{2}	-	0.016	0.911	-	0.186	0.775	-	72.631	0.996	

Table S.1: Simulation results of coverage probability, average absolute relative bias and average MSE for pattern 1 (true CDE: \sim 44.62, true NDE: 45.82, true NIE: 1.10)

Semi-parametric shape-restricted regression spline									
Variance of ϵ_1	Coverage Probability			Averag	ge Relat	tive Bias	Average MSE		
	CDE	NDE	NIE	CDE	NDE	NIE	CDE	NDE	NIE
10^{2}	0.950	0.974	0.972	0.076	0.074	2.405	3.442	3.114	0.264
20^{2}	0.948	0.966	0.968	0.138	0.137	4.704	11.496	10.673	1.008
30^{2}	0.944	0.956	0.962	0.195	0.195	6.954	23.035	21.703	2.205
40^{2}	0.946	0.962	0.962	0.247	0.249	9.200	37.434	35.597	3.847
			Lin	lear reg	ression				
Variance of ϵ_1	Coverage Probability			Average Relative Bias			Average MSE		
	CDE	NDE	NIE	CDE	NDE	NIE	CDE	NDE	NIE
10^{2}	0.560	0.638	0.928	0.124	0.116	3.157	7.376	6.172	0.434
20^{2}	0.796	0.836	0.940	0.134	0.130	4.953	10.357	9.227	1.109
30^{2}	0.888	0.892	0.938	0.159	0.159	7.000	15.533	14.491	2.226
40^{2}	0.908	0.928	0.938	0.192	0.195	9.135	22.902	21.964	3.786
			Generali	ized add	litive mo	odel			
Variance of ϵ_1	Covera	age Prol	oability	Average Relative Bias			Average MSE		
	CDE	NDE	NIE	CDE	NDE	NIE	CDE	NDE	NIE
10^{2}	-	0.000	0.895	-	0.186	0.619	-	13.722	0.068
20^{2}	-	0.037	0.901	-	0.185	1.195	-	14.407	0.257
30^{2}	-	0.356	0.901	-	0.185	1.771	-	15.593	0.571
40^{2}	-	0.550	0.901	-	0.187	2.351	-	17.313	1.010

Table S.2: Simulation results of coverage probability, average absolute relative bias and average MSE for pattern 2 (true CDE: \sim 19.85, true NDE: 19.17, true NIE: -0.17)

Semi-parametric shape-restricted regression spline										
Variance of ϵ_1	Covera	age Prol	oability	Averag	ge Relat	tive Bias	Average MSE			
	CDE	NDE	NIE	CDE	NDE	NIE	CDE	NDE	NIE	
10^{2}	0.920	0.944	0.894	0.095	0.084	0.192	3.145	2.910	0.940	
20^{2}	0.934	0.946	0.924	0.175	0.156	0.287	10.708	10.134	2.193	
30^{2}	0.940	0.950	0.934	0.252	0.226	0.396	22.092	21.157	4.190	
40^{2}	0.942	0.954	0.936	0.324	0.293	0.508	36.892	35.725	6.915	
	Linear regression									
Variance of ϵ_1	Coverage Probability			Averag	Average Relative Bias			Average MSE		
	CDE	NDE	NIE	CDE	NDE	NIE	CDE	NDE	NIE	
10^{2}	0.000	0.000	0.130	0.624	0.592	0.458	88.930	93.747	3.865	
20^{2}	0.010	0.010	0.532	0.629	0.596	0.460	93.545	98.385	4.448	
30^{2}	0.148	0.134	0.736	0.634	0.601	0.487	100.355	105.232	5.473	
40^{2}	0.352	0.336	0.820	0.641	0.607	0.531	109.360	114.288	6.940	
			Genera	lized ad	lditive n	nodel				
Variance of ϵ_1	Coverage Probability			Average Relative Bias			Average MSE			
	CDE	NDE	NIE	CDE	NDE	NIE	CDE	NDE	NIE	
10^{2}	-	0.000	0.000	-	0.609	0.476	-	82.627	4.150	
20^{2}	-	0.000	0.068	-	0.611	0.477	-	84.116	4.360	
30^{2}	-	0.000	0.288	-	0.614	0.479	-	86.181	4.684	
40^{2}	-	0.010	0.503	-	0.617	0.484	-	88.846	5.125	

Table S.3: Simulation results of coverage probability, average absolute relative bias and average MSE for pattern 3 (true CDE: \sim -15.00, true NDE: -16.24, true NIE: 4.08)

Semi-parametric shape-restricted regression spline									
Variance of ϵ_1	Covera	age Prol	oability	Averag	ge Relat	tive Bias	Average MSE		
	CDE	NDE	NIE	CDE	NDE	NIE	CDE	NDE	NIE
10^{2}	0.936	0.938	0.954	0.056	0.054	0.301	1.421	1.404	0.497
20^{2}	0.936	0.926	0.910	0.108	0.105	0.548	2.755	2.730	0.905
30^{2}	0.946	0.940	0.858	0.158	0.153	0.786	4.012	3.978	1.296
40^{2}	0.944	0.942	0.854	0.206	0.200	1.033	5.249	5.204	1.704
			Lin	near reg	ression				
Variance of ϵ_1	Coverage Probability			Average Relative Bias			Average MSE		
	CDE	NDE	NIE	CDE	NDE	NIE	CDE	NDE	NIE
10^{2}	0.936	0.932	0.944	0.033	0.032	0.234	1.097	1.107	0.239
20^{2}	0.936	0.932	0.942	0.065	0.064	0.452	4.389	4.417	0.898
30^{2}	0.936	0.932	0.942	0.098	0.096	0.674	9.875	9.936	1.999
40^{2}	0.936	0.932	0.944	0.131	0.128	0.897	17.556	17.664	3.543
			Generali	ized add	litive mo	odel			
Variance of ϵ_1	Covera	age Prol	oability	Average Relative Bias			Average MSE		
	CDE	NDE	NIE	CDE	NDE	NIE	CDE	NDE	NIE
10^{2}	-	0.942	0.906	-	0.017	0.143	-	0.295	0.088
20^{2}	-	0.948	0.911	-	0.033	0.251	-	1.143	0.276
30^{2}	-	0.953	0.906	-	0.049	0.366	-	2.553	0.589
40^{2}	-	0.953	0.906	-	0.066	0.482	-	4.523	1.026

Table S.4: Simulation results of coverage probability, average absolute relative bias and average MSE for linear pattern (true CDE: ~ 25.44 , true NDE: 26.07, true NIE: 1.65)